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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/618,431
	<b>Filing Date</b>	July 18, 2000
	<b>First Named Inventor</b>	Siu Chung Tam
	<b>Group Art Unit</b>	2826
	<b>Examiner Name</b>	Mondt, Johannes P
<b>Total Number of Pages in This Submission</b>	<b>Attorney Docket Number</b>	A33341 - 065141.0107

<b>ENCLOSURES (check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<b>Remarks</b> <input type="checkbox"/>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>	
<b>Firm or Individual name</b>	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
<b>Signature</b>	 Att Name: Bradley B. Geist PTO Reg: 27,551
<b>Date</b>	Bradley B. Geist

<b>CERTIFICATE OF MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date: <input type="text" value="Bradley B. Geist"/>	
<b>Typed or printed name</b>	Bradley B. Geist
<b>Signature</b>	
<b>Date</b>	Bradley B. Geist



**BAKER BOTTS LLP**

Attorney Docket Number: A33341 - 065141.0107

Title: A SEMICONDUCTOR PASSIVE Q-SWITCH PROVIDING VARIABLE OUTPUTS

Use Space Below for Additional Information: